

**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☒ Declaration  
Submitted  
with Initial  
Filing

OR

☐ Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number DB001018-000

First Named Inventor Yesh, et al.

**COMPLETE IF KNOWN**

Application Number None

Filing Date 05/10/2002

Art Unit None

Examiner Name None

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**INTEGRATED RAPID ACCESS ENTRY/EGRESS SYSTEM**

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.


| Prior Foreign Application<br>Number(s) | Country | Foreign Filing Date<br>(MM/DD/YYYY) | Priority<br>Not Claimed  | Certified Copy Attached? |                          |
|----------------------------------------|---------|-------------------------------------|--------------------------|--------------------------|--------------------------|
|                                        |         |                                     |                          | YES                      | NO                       |
|                                        |         |                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                        |         |                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                        |         |                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                        |         |                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

## DECLARATION — Utility or Design Patent Application

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                   |  |                                                                                    |  |                                                          |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------|--|------------------------------------------------------------------------------------|--|----------------------------------------------------------|--|
| Direct all correspondence to: <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                        |  | Customer Number or Bar Code Label |  |  |  | OR <input type="checkbox"/> Correspondence address below |  |
| <b>24122</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                   |  |                                                                                    |  |                                                          |  |
| PATENT TRADEMARK OFFICE                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                   |  |                                                                                    |  |                                                          |  |
| Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                   |  |                                                                                    |  |                                                          |  |
| Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                   |  |                                                                                    |  |                                                          |  |
| City                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                   |  | State                                                                              |  | ZIP                                                      |  |
| Country                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                   |  | Telephone                                                                          |  | Fax                                                      |  |
| <small>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</small> |  |                                   |  |                                                                                    |  |                                                          |  |
| NAME OF SOLE OR FIRST INVENTOR:                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                   |  | <input type="checkbox"/> A petition has been filed for this unsigned inventor.     |  |                                                          |  |
| Given Name<br>(first and middle (if any))                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                   |  | Family Name<br>or Surname                                                          |  |                                                          |  |
| John L.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                   |  | Puskarić                                                                           |  |                                                          |  |
| Inventor's Signature<br><i>John L. Puskarić</i>                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                   |  | Date<br>5-9-02                                                                     |  |                                                          |  |
| Coraopolis                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | PA                                |  | USA                                                                                |  | USA                                                      |  |
| Residence: City                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | State                             |  | Country                                                                            |  | Citizenship                                              |  |
| 511 Burkes Drive                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                   |  |                                                                                    |  |                                                          |  |
| Mailing Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                   |  |                                                                                    |  |                                                          |  |
| Coraopolis                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | PA                                |  | 15108                                                                              |  | USA                                                      |  |
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| NAME OF SECOND INVENTOR:                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                   |  | <input type="checkbox"/> A petition has been filed for this unsigned inventor.     |  |                                                          |  |
| Given Name<br>(first and middle (if any))                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                   |  | Family Name<br>or Surname                                                          |  |                                                          |  |
| Frank G.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                   |  | Yesh                                                                               |  |                                                          |  |
| Inventor's Signature<br><i>Frank G. Yesh</i>                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                   |  | Date<br>5-9-02                                                                     |  |                                                          |  |
| Greensburg                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | PA                                |  | USA                                                                                |  | USA                                                      |  |
| Residence: City                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | State                             |  | Country                                                                            |  | Citizenship                                              |  |
| 2941 Seminary Drive                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                   |  |                                                                                    |  |                                                          |  |
| Mailing Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                   |  |                                                                                    |  |                                                          |  |
| Greensburg                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | PA                                |  | 15601                                                                              |  | USA                                                      |  |
| City                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | State                             |  | ZIP                                                                                |  | Country                                                  |  |
| <input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/DZA attached hereto.                                                                                                                                                                                                                                                                                                                                      |  |                                   |  |                                                                                    |  |                                                          |  |

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| Applicants  | Title                                       | Serial No.       | Filing Date |
|-------------|---------------------------------------------|------------------|-------------|
| Yesh, et al | Integrated Rapid Access Entry/Egress System | Not Yet Assigned | 10 May 2002 |

## Power of Attorney

I hereby revoke all previous powers of attorney, if any, and appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Edward L. Pencoske      Reg. No. 29,688  
 Chiara F. Orsini      Reg. No. 48,744  
 Jennifer C. Slinsky      Reg. No. 46,064  
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Please Direct All Correspondence to:

Chiara F. Orsini, Esquire  
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## Declaration

I hereby declare that my presentation of this paper constitutes a certification under 37 C.F.R. § 10.18, which provides, in part, that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and that further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful statements may jeopardize the validity of the application and any patent issuing therefrom.

Date May 9, 2002  
 Signature Frank C. Yesh  
 Name Frank C. Yesh

Date May 9, 2002  
 Signature John L. Puskaric  
 Name John L. Puskaric